Maryland Board of Pharmacy Public Board Meeting

Agenda January 19, 2022

Name	Title	Present	Absent
Bouyoukas, E	Commissioner		
Evans, K.	Commissioner		
Fink, K.	Commissioner		
Hardesty, J.	Commissioner/President		
Geigher, P.	Commissioner		
Leikach, N.	Commissioner/Treasurer		
Morgan, K.	Commissioner		
Oliver, B	Commissioner		
Rusinko, K.	Commissioner/Secretary		
Singal, S.	Commissioner		
Vasquez, J.	Commissioner		
Yankellow, E.	Commissioner		
Bethman, L.	Board Counsel		
Felter, B.	Board Counsel		
Speights-Napata, D.	Executive Director		
Green, J.	Acting Deputy Director / Operations		
James, D.	Licensing Manager		
Leak, T.	Compliance Director		
Reed, J.	Legislative Liaison		

Chew, C.]	Enforcement Compliance Auditor		
I. Executive	A.) J.	Members of the Board with a conflict of interest relating to any it		
Committee	Hardesty,	on the agenda are advised to notify the Board at this time or when	n	
Report(s)	Board President	the issue is addressed in the agenda.		
	Trestaent	1. Call to Order		
		2. Sign-in Introduction and of meeting attendees – (Please		
		indicate on sign-in sheet if you are requesting CE Units for		
		attendance)		
		3. Distribution of Agenda and packet materials		
	B.)K. Rusinko,	4. Review and approve November 2021 Public Meeting		
	Secretary	Minutes		
II. A. Executive	D.	1.		
Director Report	Speights-Napa ta, Executive			
	Director			
B. New Business	J. Hardesty,	1. None		
	Board			
C O	President			
C. Operations	J. Green, Deputy	1. Procurement and Budget Updates a:		
	Director/			
	Operations	2. Management Information Systems (MIS) Unit Update	es	
		a:		
D. Licensing	E. Bouyoukas,			

Commissioner	1. Unit Update	S				_
	2. Monthly Stat	istics				
	License Type	New	Renewed	Reinstated	Total	
	Distributor					
	Pharmacy					
	Pharmacist					
	Vaccination					
	Pharmacy					
	Intern - Graduate					
	Pharmacy Intern -					
	Student Pharmacy					
	Technician Pharmacy					
	Technician- Student					
	TOTAL					

E. Compliance	T. Leak,	1. Unit Updates	
	Compliance Director	2. Monthly Statistics	
		Complaints & Investigations:	
		New Complaints –	
		Medication Error -	
		• Employee Pilferage –	
		 Disciplinary Action in Another State – 	
		Unprofessional Conduct – Prince of the Conduct – Response of the Con	
		• Dispensing Error –	
		 Refusal to Fill – Customer Service - 	
		 Customer Service - Prior Charges for Criminal Issues/Addictions - 	
		Inspection Issues –	
		 NABP VPP Compounding Issues – 	
		Resolved (Including Carryover) –	
		Actions within Goal –	
		Final disciplinary actions taken –	
		Summary Actions Taken –	
		Average days to complete –	
		Inspections:	
		Total -	
		Annual Regulatory Inspections -	
		COVID Vaccine Storage Inspections-	
		Narcotic Audit Follow Ups -	

F. Legislation &	J. Reed,	Regulations	F. Legislation & Regulations
Regulations	Legislative		
	Liaison	Proposed COMAR 10.34.41 Administration of a Maintenance	
		Injectable Medication has been signed by the Secretary of Health and	
		submitted to the Division of State Documents for publication is the	
		Maryland Register.	
		Emergency Regulation COMAR 10.34.13.04B Temporary Waiver	
		for Expired Licenses provides for a temporary waiver of certain	
		application requirements during the state of emergency. See the	
		Governor's Executive Order and press release.	
		E B 14' COMAD 10 24 15 I' I B ' '4	
		Emergency Regulation COMAR 10.34.15 Licensure by Reciprocity	
		simplifies or eliminates the administrative burdens for interstate	
		compact or out-of-state healthcare practitioners to practice in	
		Maryland licensed healthcare facilities. See the	
		Governor's Executive Order and press release.	
		<u>Legislation</u>	

Invited Speaker: Catherine Burdalski Rinaldi, PharmD, BCOP, NCTTP Clinical Pharmacy Specialist, Oncology Johns Hopkins Bayview Medical Center	
Topic: SB62/HB28 Pharmacists - Aids for the Cessation of Tobacco Product Use	

Bill Number	<u>Bill Name</u>	<u>Bill</u> Sponsor(s)	Synopsis	Explanation of Impact (EOL) and Fiscal Estimate Worksheet (FEW)	<u>Position</u>	<u>Notes</u>	<u>Hearing</u> <u>Date</u>
HB0028 SB62	Pharmacists - Aids for the Cessation of Tobacco Product Use	Delegate Harry Bhandari Delegate Robbyn Lewis Senator Mary Washington	Synopsis not available currently.	EOL (no impact) submitted to OGA on 01/04/2022.	PHARM – LOC HB 28 SB 62		SB 28- January 20 th @ 2 PM
HB0112	Health Occupations - Service Members, Veterans, and Military Spouses - Temporary Licensure, Certification, Registration, and Permitting	Delegate Brian Crosby	Synopsis not available currently.	EOL (no impact) submitted to OGA on 01/04/2022.	PHARM – <u>Changed to</u> <u>LOI</u>	HB 225 Veterans Full Employment Act of 2013 is current law and accomplishes the intention of the proposed legislation. See the notice posted on the Board's website.	January 20 th @ 2 PM
SB0019	Pharmacists – Administration	Senator Clarence Lam	Synopsis not	EOL (no impact)	PHARM –	Objective is to change the definition of	

	of Maintenance Injectable Medications – Treatment of Sexually Transmitted Infections		available currently.	submitted to OGA on 01/04/2022.	changed to LOS	"maintenance injectable medication" to include a sexually transmitted infection. Sen. Lam is a board-certified physician.
SB0077	Health Occupations Boards – Investigations – Right to Counsel	Senator Chris West	Synopsis not available currently.	EOL (no impact) submitted to OGA on 01/04/2022.	PHARM – <u>changed to</u> <u>LOC</u> (joint letter)	Pharmacists, pharmacy technicians, and pharmacy interns have a right to counsel during a hearing currently, but not during the investigation. Md. Code Ann., Health Occ., §§ 12-315(d), 12-6B-09, 12-6D-11.
SB0111	Occupational Licenses or Certificates - Pre-application Determinations - Criminal Convictions	Senator Cory McCray	Synopsis not available currently.	EOL (impact) and FEW (\$10K) submitted to OGA on 01/04/2022.	PHARM – NP	The Board anticipates that establishing a process for potential applicants for an occupational license to obtain a determination from the Board as to whether certain criminal convictions would be the basis for the denial of an application for a certain occupational license would cause an operational and fiscal impact. The Board would need to alter the method of processing applications to include a pre-application determination for criminal convictions. The Board would require a part-time employee to review a pre-application, make a determination, and issue a written explanation to a potential applicant.

SB0144	Health -	Senator Brian	Synopsis	EOL (no	PHARM –	Amygdalin is not approved for use in
BBOTT	Authorization	Feldman	not	impact)	NP	the United States currently.
	to Prescribe and	<u>r craman</u>	available	submitted to	111	the officed states currently.
	Administer		currently.	OGA on		The Food and Drug Administration
	Amygdalin -		currently.	01/04/2022.		has banned the sale and use of
				01/04/2022.		amygdalin (Laetrile®) due to the risk
	Repeal					
						of cyanide poisoning. For this reason,
						Laetrile® is only offered at
						alternative medicine clinics outside
						the United States. Laetrile is made in
						Mexico. The way that laetrile is made
						is not regulated by the FDA, so
						batches of laetrile may vary in purity
						and contents. Some clinics use it as a
						component of
						multi-modality metabolic therapies,
						but these therapies generally have not
						been found effective.
SB0159	<u>Health</u>	Senators	Synopsis	EOL	PHARM –	The Board will require additional
	Occupations –	<u>Delores</u>	not	(impact) and	NP	staff members, equipment, or capital
	Authorized	Kelley,	available	FEW		to create and maintain a file of
	<u>Prescribers</u> –	<u>Pamela</u>	currently.	(\$7.9K)		pharmacists that receive a financial
	Reporting of	Beidle,		submitted to		gratuity or incentive from a
	Financial	Joanne		OGA on		pharmaceutical distributor or
	Gratuities or	Benson,		01/05/2022.		manufacturer.
	Incentives	Jill Carter,				
		Brian				The Board does not currently collect
		Feldman,				this type of information and would
		Guy				need to implement a new system to
		Guzzone,				solicit, receive, and maintain a
		Charles				database of financial disclosures. Due
		Sydnor, and				to the nature of the disclosures,

		Jeff Waldstreicher			access to the database would need to be secured and limited to select individuals. The Board would likely need to expand the responsibilities of a current staff member and purchase new software to implement this legislation.	
HB260	State Board of Physicians — Dispensing Permits	Carr Committee Health & d Gov. Ops th C So A to B P al ci u p d d to	ransferring versight of the aspection of the offices of ispensing hysicians from the Office of controlled tubstances dministration to the State toard of thysicians; and litering the froumstances ander which a thysician may ispense drugs, evices, or opical medications.	PHARM –	Objective: 1) if they have a permit from BOP/OSCA, allow physicians to personally prepare and dispense prescription 2) allows a physician to dispense 72 hours of a starter dose 3) introduced a physician "topical medication permit" 4) BOP conducts inspections of offices that have a BOP-issued dispensing permit 5) OSCA will no longer have any inspection right, but they will receive an inspection report only if a violation is discovered. Pharmacy statutes that are amended: Health Occ., §§ 12-102, 1, 12-102.2.	Jan. 25
HB0229	Pharmacists – Administration of	Senators A K. Young Beleastro	Itering the efinition of maintenance ijectable	PHARM –	Note: The Committee discussed the cross-filed bill last week. It has identical language.	

-cross-fil ed with SB19	Maintenance Injectable Medications – Treatment of Sexually Transmitted Infections	Forbes Healey McComas Reznik Ruth Committee Health & Gov. Ops	medication" for the purposes of provisions of law governing the administration of maintenance injectable medications by pharmacists to include a medication that treats a sexually transmitted infection and is not a vaccine.		Objective: change the definition of "maintenance injectable medication" to include a sexually transmitted infection.	
HB0235	Open Meetings Act - Definition - Administrative Function	Delegates Carr Lehman Committee Health & Gov. Ops	Excluding the administration of certain personnel matters from the definition of "administrative function" as it relates to the Open Meetings Act.	PHARM –	Objective: the Board would no longer be required (allowed?) to discuss HR issues of appointees (?), employees, or officials that are directly controlled by the Board. appointments, employments, assignments, promotions, disciplinary actions, demotions, compensation, removal, resignations, or performance evaluations of an appointee, employee, or official over which the Board has direct jurisdiction.	
HB0246	Open Meetings Act – Notices, Closed Sessions, and Minutes –	Delegates: Carr Lehman Committee Health & Gov. Ops	Altering from 1 year to 3 years the period of time a public body is required to retain a certain notice and certain	PHARM –	Objective: Change the requirement to keep a copy of a meeting notice from 1 year to 3 years after the date of the session. Require the notice to be posted online OR provided on request within 2 business days.	

	Retention Periods, Online Posting, and Public Inspection		written closing statement under the Open Meetings Act; requiring a public body, to the extent practicable, to post a certain written closing statement online; and requiring a public body, if it does not post certain minutes or recordings or a certain written closing statement online, to provide an electronic copy of the minutes, recordings, or statement on request to a requestor within 2 business days of the request.		Require the Board to provide an electronic copy of Board minutes within 2 business days of receiving a request.	
SB0230	Health Occupations - Service	Senator <u>Jackson</u>	Requiring health occupations boards to issue a temporary	PHARM –	Note: The Committee discussed the cross-filed bill last week. It has identical language.	
Cross-fil ed with	Members, Veterans, and	Committee	license, certificate,		Objective: Create a new class of	
HB 112	Military		registration, or		temporary licensees for a service	
	<u>Spouses -</u>	Ed., Health,	permit to a service member,		member and their spouse.	
	Temporary Licensure,	& Enviro. Affairs	veteran, or			

Certification, Registration, and Permitting	who meets certain requirements; and prohibiting a health occupations board from issuing a certain temporary license, certificate, registration, or permit if the issuance would pose a risk to public health,	HB 225 Veterans Full Employment Act of 2013 is current law and accomplishes the intention of the proposed legislation.
	welfare, or safety.	



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

Board of Morticians and Funeral Directors 4201 Patterson Avenue Baltimore, MD 21215

[DATE]

The Honorable Paul G. Pinsky and committee members Chair, Education, Health. and Environmental Affairs Committee 2 West Miller Senate Office Building 11 Bladen Street Annapolis, MD 21401

RE: SB 77- Health Occupations Boards - Investigations - Right to Counsel - Letter of Concern

Dear Chair Pinsky:

The Maryland State Board of Morticians and Funeral Directors (the "Board") is submitting this Letter of Concern for SB 77 – Health Occupations Boards – Investigations – Right to Counsel.

While the bill does have the positive intent to allow licensees to use private counsel during the course of an investigation into possible violations of the Maryland Morticians and Funeral Directors Act, Md. Code Ann., Health Occ. § 7-101, et seq., there are the following concerns from several health occupations boards that encompass legal, administrative, and public protection matters:

1. On page 1, lines 16-20 regarding § 1-610(1): Providing for representation by counsel of a licensee of certificate holder during an investigation that may result in charges or sanctions.

The Board is concerned that the bill applies only to licensees and certificate holders. Health occupations boards also issue registrations and permits.

The Board is also concerned that the bill is overly broad and has the potential to impede the Board's completion of its statutory duty to protect the public through lawful investigation of complaints. The Board supports the opportunity for licensees to engage and consult with their own counsel during all stages of an investigation and permits licensees to have their counsel accompany them during interviews. The bill does not clarify what representation during an investigation would involve. Every complaint filed with the Board could potentially result in charges, but the vast majority of complaints are closed during the preliminary investigation and do not reach the interview stage. The Board already has a statutory provision for a licensee to be represented by counsel at the hearing regarding disciplinary action. Md. Code Ann., Health Occ. § 7-319(c). The Board's regulations also provide that "[a]II parties [appearing at formal hearings] shall have the right to be accompanied, represented and advised by counsel." COMAR 10.29.01.03. This bill would expand that right to investigations that "may result in charges or sanctions."

Page 2 SB 77 – Letter of Concern MSBMFD

The Board is concerned that the bill contains no provision for addressing counsel who become disruptive or obstructive or who otherwise interfere with the investigative process. Board interviews support the Board's fact-finding missions and allow the Board to properly investigate complaints and determine whether further action by the Board is necessary. Interviews occur prior to any charges being filed, and in the majority of cases, no charges are filed as a result of these investigations. These interviews, however, are a vital part of the Board's investigative process, so disrupting, obstructing, or interfering with that process could jeopardize the health, safety, and welfare of Maryland's citizens.

The Board has concerns that retained counsel will use the language in the bill to dictate to the Board as to when and how the Board can conduct its interviews. Board interviews are not depositions and there is no legal process for a court to rule on counsel's objections in an interview, as in a deposition.

2. On page 1, line 22, continued to page 2, lines 1-2 regarding § 1-610(2): Providing for attendance by counsel at any interview of a licensee by or on behalf of a board during an investigation.

The Board is concerned that there is no definition or clarification as to what constitutes an interview of the licensee or certificate holder. During the course of an investigation, Board investigators typically communicate with a licensee on numerous occasions, from providing initial notice that a complaint has been filed to performing unscheduled site inspections. The Board is concerned that some licensees will attempt to delay or halt the investigative process by claiming that any communication from the Board constitutes an interview and then refuse to talk to the Board without the presence of counsel.

To clarify the intended scope of this bill and avoid unintended consequences, it is imperative that the bill exclude the Board's statutorily-authorized inspection program. Such inspections are generally routine, but may arguably result in charges depending on the severity of violations at the establishment. The Board must perform on-site inspections as a key component to ensuring the safe operation of establishments in providing healthcare services. If a licensee is able to stall or thwart an inspection because an attorney is not available to appear onsite, the Board's inspection program will be severely undermined at the expense of public safety.

For these reasons, the Maryland State Board of Morticians and Funeral Directors; the State Board of Social Work Examiners; the State Board of Examiners in Optometry; the State Board for the Certification of Residential Child Care Program Professionals; the State Board of Massage Therapy Examiners; the State Board of Chiropractic Examiners; the State Board of Physical Therapy Examiners; the State Board of Pharmacy; the State Acupuncture Board; the State Board of Examiners for Audiologists, Hearing Aid Dispensers, Speech-Language Pathologists and Music Therapists; the State Board of Examiners of

Page 3 SB 77 – Letter of Concern MSBMFD

Psychologists; the State Board of Examiners of Nursing Home Administrators; and the State Board of Environmental Health Specialists respectfully ask that you strongly consider this information and agree that the processes currently in place are more than sufficient to address the issues in the bill. Therefore, the boards urge an unfavorable report on SB 77.

For more information, please contact Christy Collins, Executive Director, Board State Board of Morticians and Funeral Directors at (410) 764-4714 or christy.collins@maryland.gov or, Lillian Reese, Legislative Coordinator for Boards & Commissions, at 443-794-4757 or lillian.reese@maryland.gov.

Sincerely,

Mark Bailey, Ed.D Board Chair

Maryland Board Morticians and Funeral Directors

The opinion of the Boards expressed in this document do not necessarily reflect that of the Department of Health or the Administration.



STATE OF MARYLAND

Department of Health

Lawrence J. Hogan, Governor – Boyd K. Rutherford, Lt. Governor – Robert R. Neall, Secretary

MARYLAND BOARD OF PHARMACY

Jennifer L. Hardesty, Board President – Deena Speights-Napata, Executive Director

January 18, 2022

The Honorable Paul G. Pinsky, Chairman Senate Education, Health, and Environmental Affairs Committee Miller Senate Office Building, Suite 2 West 11 Bladen Street Annapolis, MD 21401

RE: Senate Bill 62 – Pharmacists – Aids for the Cessation of Tobacco Product Use – Letter of Concern

Dear Chairman Pinsky and Committee Members:

The Maryland Board of Pharmacy (the "Board") is submitting this letter of concern for Senate Bill (SB) 62 – Pharmacists – Aids for the Cessation of Tobacco Product Use.

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SB 62 would expand the definition of "practice pharmacy" to include "prescribing and dispensing nicotine replacement therapy medications approved by the U.S. Food and Drug Administration (FDA) as an aid for the cessation of the use of tobacco products." The Board would be required to promulgate regulations establishing standard procedures that a pharmacist must follow to prescribe and dispense aids for the cessation of tobacco products.

After reviewing the text of SB 62, the Board has concern regarding the ambiguity of the scope. The Board is unclear as to whether the "tobacco replacement product" includes all smoking cessation products or only nicotine replacement products. The Board submits that SB 62 should be amended to define "tobacco replacement product" specifically.

I hope this information is useful. If you would like to discuss this further, please do not hesitate to contact me at deena.speights-napata@maryland.gov / (410) 764-4753.

Sincerely,

Deena Speights-Napata, MA Executive Director

Jennifer L. Hardesty, PharmD, FASCP President

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STATE OF MARYLAND

Department of Health

Lawrence J. Hogan, Governor - Boyd K. Rutherford, Lt. Governor - Robert R. Neall, Secretary

MARYLAND BOARD OF PHARMACY

Jennifer L. Hardesty, Board President - Deena Speights-Napata, Executive Director

January 18, 2022

The Honorable Shane E. Pendergrass, Chairwoman Health and Government Operations Committee 241 House Office Building Annapolis, MD 21401-1991

RE: House Bill 28 – Pharmacists – Aids for the Cessation of Tobacco Product Use – Letter of Concern

Dear Chairwoman Pendergrass and Committee Members:

The Maryland Board of Pharmacy (the "Board") is submitting this letter of concern for House Bill (HB) 28 – Pharmacists – Aids for the Cessation of Tobacco Product Use.

After reviewing the text of HB 28, the Board has concern regarding the ambiguity of the scope. The Board is unclear as to whether the "tobacco replacement product" includes all smoking cessation products or only nicotine replacement products. The Board submits that HB 28 should be amended to define "tobacco replacement product" specifically.

I hope this information is useful. If you would like to discuss this further, please do not hesitate to contact me at deena.speights-napata@maryland.gov / (410) 764-4753.

Sincerely,

Deena Speights-Napata, MA Executive Director Jennifer L. Hardesty, PharmD, FASCP President

STATE OF MARYLAND



Department of Health

Lawrence J. Hogan, Governor - Boyd K. Rutherford, Lt. Governor - Robert R. Neall, Secretary

MARYLAND BOARD OF PHARMACY

Jennifer L. Hardesty, Board President – Deena Speights-Napata, Executive Director

January 18, 2022

The Honorable Shane E. Pendergrass, Chairwoman Health and Government Operations Committee 241 House Office Building Annapolis, MD 21401-1991

RE: House Bill 112 – Health Occupations – Service Members, Veterans, and Military Spouses – Temporary Licensure, Certification, Registration, and Permitting – Letter of Information

Dear Chairwoman Pendergrass and Committee Members:

The Maryland Board of Pharmacy (the "Board") is submitting this letter of information for House Bill (HB) 112 – Health Occupations – Service Members, Veterans, and Military Spouses – Temporary Licensure, Certification, Registration, and Permitting.

HB 112 would require the Board to create a new class of expedited temporary (valid for six months after issuance) license, registration, and permit for a service member, veteran, or military spouse. The temporary license, registration, or permit requires (1) proof of an application for full licensure, certification, registration, or permitting and (2) would expire six months after issuance. HB 112 would allow a service member, veteran, or military spouse to practice pharmacy while they complete the requirements for licensure, certification, registration, or permitting in the Maryland.

The Board's current licensure, registration, and permitting process is completed within one week if a complete application is received. Currently, the Board does not issue a temporary license, registration, or permit to any applicant. Creating and issuing temporary licenses, registrations, and permits would be a huge administrative burden to the Board.

Additionally, House Bill 225 Veterans Full Employment Act of 2013 requires all Health Occupations Boards to expedite the licensing process for veterans, military spouses, and active-duty services members. *See* Md. Code Ann., Health Occ., §§ 1-701 – 706. The Board is

in full compliance with HB 225 and has posted an informational notice on its website regarding the law. The Board provides application assistance to covered persons that submit a request.

The Board supports full employment of veterans; however, creating a new class of expedited temporary permits would not provide substantial benefits to covered persons and would create administrative burdens for the Board.

I hope this information is useful. If you would like to discuss this further, please do not hesitate to contact me at <u>deena.speights-napata@maryland.gov</u> / (410) 764-4753.

Sincerely,

Deena Speights-Napata, MA Executive Director

Jennifer L. Hardesty, PharmD, FASCP President



STATE OF MARYLAND

Department of Health

Lawrence J. Hogan, Governor - Boyd K. Rutherford, Lt. Governor - Robert R. Neall, Secretary

MARYLAND BOARD OF PHARMACY

Jennifer L. Hardesty, Board President – Deena Speights-Napata, Executive Director

January 18, 2022

The Honorable Paul G. Pinsky, Chairman Senate Education, Health, and Environmental Affairs Committee Miller Senate Office Building, Suite 2 West 11 Bladen Street Annapolis, MD 21401

RE: Senate Bill 19 – Pharmacists – Administration of Maintenance Injectable Medications – Treatment of Sexually Transmitted Infections – Letter of Support

Dear Chairman Pinsky and Committee Members:

The Maryland Board of Pharmacy (the "Board") is submitting this letter of support for Senate Bill (SB) 19 – Pharmacists – Administration of Maintenance Injectable Medications – Treatment of Sexually Transmitted Infections.

SB 19 would amend the definition of "maintenance injectable medication" to specifically include a medication that "treats a sexually transmitted infection and is not a vaccine."

The Board supports the appropriate expansion of the practice of pharmacy and recognizes the importance of increasing access to treatment for Marylanders.

I hope this information is useful. If you would like to discuss this further, please do not hesitate to contact me at <u>deena.speights-napata@maryland.gov</u> / (410) 764-4753.

Sincerely,

Deena Speights-Napata, MA

Jennifer L. Hardesty,

Executive Director

PharmD, FASCP President

III. Committee		<u>DTM</u>	
Reports A. Practice Committee	Evans, K. Commissioner	Kierra Dotson has met the requirements for participation in a drug therapy management contract (infectious disease pharmacotherapy).	
Committee	Commissioner	Mackenzie Hrubey has met the requirements for participation in a drug therapy management contract (ambulatory care). Sheldon Wolfson has met the requirements for participation in a drug therapy management contract and has been approved to provide pharmaceutical services pursuant to Frederick Health's Anticoagulation Therapy protocol. Grace Finney has approved as an authorized prescriber and to provide services as a certified registered nurse practitioner pursuant to Frederick Health's Anticoagulation Therapy protocol. Frederick Health has been approved to initiate its Anticoagulation Therapy protocol at a new address: Frederick Health Liberty, 194 Thomas Johnson Drive, Frederick MD, 21702.	

QUESTIONS

Question 1. Kaiser Permanente Mid-Atlantic States RECUSED: Commissioners Fink and Bouyoukas

The Algorithm for Maryland Pharmacy Prescribing of Contraceptives includes line item 12 – "Take and document patient's BP..." as well a section titled "Pharmacy Internal Use Only" where the patient's pulse and weight must also be documented.

If the pharmacy completing this algorithm shares an electronic medical record with other healthcare providers and records indicate the patient's BP, pulse, and weight have been taken recently, must the pharmacist take the patient's BP, pulse, and weight again?

If no, how recent must the patient's BP, pulse and weight have been taken to satisfy this portion of the algorithm?

Answer 1. The Board would interpret vital signs collected by a healthcare provider within the 24-hour period that precedes the prescribing of a contraceptive and documented in an electronic medical record that is shared with the prescribing pharmacist to satisfy the regulatory requirement for documentation in the Algorithm.

Question 2. K. Wolfe

[A medical practice is] in the process of transferring to managing our own ACO via the MDPCP program. As such, we are in the process of researching guidance for hiring an Ambulatory Care Clinical Pharmacist to assist with transition of care management, polypharmacy, and disease management for our patient population. Also, we are interested in recruiting a pharmacist that would be able to recommend generic drugs to assist with cost effectiveness.

[Does] the...Board...have any recommendations in recruiting an independent pharmacist? Having a MD license is a bare minimum, but we would also like to have additional certification such as ambulatory care or geriatric certifications. Do you have any other recommendations or resources that we should consider in recruiting a pharmacist with this scope?

Answer 2. The Maryland Board of Pharmacy does not provide recruitment advice. A review of the requirements for a pharmacist to participate in a drug therapy management contract that are listed in COMAR 10.34.29.04 may be helpful when making recruiting decisions.

Question 3. S. Donoway.

We are going to be working with a specialty pharmacy for our cataract patient's eye drops (OPDrop PMB (Prednisolone Sodium Phosphate 1%/Moxifloxacin 0.5%/Bromfenac 0.075%) compounded in one bottle) that will be used after surgery. Our surgeons will be sending the prescription via e-script to the pharmacy. The pharmacy will then contact the patient for payment and the drops will be mailed. Due to the large number of patients that lose their drops or otherwise, show up without them, we would like to have the pharmacy mail the drops to our facility to be given to the patient the morning of surgery. Our facility, and all three surgeons, are licensed appropriately, including their CDS and DEA. Is this allowable? I can't seem to find information that applies specifically to this situation. If this is not allowed, what would be the procedure we would need to follow in order to have the drops mailed to us?

Answer 3. Provided that the eye drops are dispensed pursuant to a valid prescription, the prescription is patient-specific, and the regulations in COMAR 10.34.25 are followed, this practice is not prohibited.

B. Licensing	K. Rusinko,		
Committee	Chair		
C. Public	E. Yankellow,	Public Relations Committee Update:	
Relations	Chair	- was stronger of the stronger	
Committee			
D. Disciplinary	J. Hardesty,	Disciplinary Committee Update	
	Chair		
E. Emergency	N. Leikach,	Emergency Preparedness Task Force Update	
Preparedness Task Force	Chair		
IV. Other	J. Hardesty,		
Business & FYI	President		
V. Adjournment	J. Hardesty,	A. The Public Meeting was adjourned.	
	President		
		B. J. Hardesty convened a Closed Public Session to conduct a	
		medical review committee evaluation of confidential	
		applications.	

C. The Closed Public Session was adjourned. Immediately thereafter, K. Morgan convened an Administrative Session for purposes of discussing confidential disciplinary cases.	
D. With the exception of cases requiring recusals, the Board members present at the Public Meeting continued to participate in the Closed Public Session and the Administrative Session.	